

FORM 600 CHECKLIST

30025091-41F

Alton Living Trust

Jan R Mack

APPLICATION NUMBER

APPLICANT’S NAME

REVIEWED BY

BASIN CLOSURE CHECK

Is the application in a basin closure area? ☐ NO ☒ YES If yes, which one? Madison & Upper Missouri

Does the application fall under an exception? ☐ NO ☒ YES If yes, which one? ☐ NA Explain Non-consumptive

**Ground Water Exceptions:** Complete the following for ground water applications located in a basin closure where an exception is allowed for ground water that is not immediately or directly connected to the source. If you have not already done so, inform the Applicant that they need to provide information to show groundwater is not immediately or directly connected to surface water in the area of their proposed source before the application can go forward. The Department interprets immediately or directly connected to mean ground water that does not induce surface water directly from surface water. For further information, see the “How to Test for Immediate or Direct Hydraulic Connection” document. This information must be evaluated and accepted before moving on to the correct and complete determination.

Is the exception for ground water? ☐ NO ☐ YES If yes, complete the information below.

Explain how you know that the water sought by this application is not immediately or directly connected to a surface water source.

FORM CHECK

	OK	NOK	N/A	
1.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standarized name
2.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PROCESSING CHECK

OK	NOK		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	600 APPLICATION FEE	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	OWNER NAME/ADDRESS STANDARDIZED	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> NA ASSOCIATED RIGHTS – COPIES IN FILE—FLAGS PREPARED—REMARKS CODED	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> NA NOTICE AREA MAP COMPLETED	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	EA COMPLETED	DATE 12/21/2006
<input type="checkbox"/>	<input type="checkbox"/>	EA E-MAILED TO EQC AND DNRC	DATE

ACTIONS TAKEN

YES	NO	NA			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	612 SENT	DATE	SIGNED 612
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DEFICIENCY ADDRESSED	DATE	11/29/2006
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DEFICIENCY RESPONSE RECEIVED	DATE	12/18/2006
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPLICATION FOUND CORRECT & COMPLETE	DATE	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PRELIMINARY CRITERIA ASSESSMENT COMPLETED		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FILE SENT TO WATER MANAGEMENT BUREAU	DATE	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PUBLIC NOTICE WAIVED		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPLICATION PUBLISHED	OBJECTION DEADLINE	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OBJECTIONS RECEIVED		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FINAL CRITERIA ASSESSMENT SIGNED		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PERMIT ISSUED	DATE	

# FORM 600 CHECKLIST

## CORRECT & COMPLETE CRITERIA CHECK

**Criteria 1:**     THERE IS WATER PHYSICALLY AND LEGALLY AVAILABLE.

- ☒ The applicant provided information discussing physical water availability at the proposed point of diversion in the amount needed.
- ☒ The applicant identified existing legal demands on the source.
- ☒ The applicant provided a discussion comparing the physical water availability and the legal demands.

**Criteria 2:**     THE WATER RIGHTS OF A PRIOR APPROPRIATOR WILL NOT BE ADVERSELY AFFECTED.

- ☒ The applicant provided information showing how he can exercise and control the project to ensure prior appropriators will be satisfied.

**Criteria 3:**     THE PROPOSED MEANS OF DIVERSION, CONSTRUCTION, AND OPERATION OF THE APPROPRIATION WORKS ARE ADEQUATE.

- ☒ The applicant provided information on the proposed means of diversion, construction, and operation of the diversion works.

**Criteria 4:**     THE PROPOSED USE OF WATER IS A BENEFICIAL USE.

- ☒ The applicant provided information and data showing the proposed use is beneficial and the flow rate and volume requested are reasonable.

**Criteria 5:**     THE APPLICANT HAS A POSSESSORY INTEREST, OR THE WRITTEN CONSENT OF THE PERSON WITH THE POSSESSORY INTEREST, IN THE PROPERTY WHERE THE WATER IS TO BE PUT TO BENEFICIAL USE.

- ☒ The applicant signed the statement on the application form, Section 14.

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## COMMENTS:

